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CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	09/918,334
Filing Date	07/30/2001
First Named Inventor	Frank Yuan
Art Unit	3628
Examiner Name	Graham, Clement B.
Attorney Docket Number	17059-1

I hereby revoke all previous powers of attorney given in the above-identified application:

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: **23676**

☒ Please change the correspondence address for the above-identified application to:

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OR

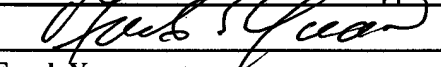
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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	Frank Yuan		
Date	July 18, 2006	Telephone	626.796.4000

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 1 forms are submitted.

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